

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Friends of Kelly Ayotte, Inc.

A. Full Name (Last, First, Middle Initial) Jeffrey R. Immelt		Date of Receipt M M D D Y Y 06 29 2015	
Mailing Address 705 West Road		Transaction ID : A-CF31089	
City New Canaan	State CT	Zip Code 06840-2518	Amount of Each Receipt this Period , 2700 .
FEC ID number of contributing federal political committee. C			
Name of Employer GE	Occupation Chairman & CEO		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 2700 .		
B. Full Name (Last, First, Middle Initial) James C. Williams		Date of Receipt M M D D Y Y 06 12 2015	
Mailing Address 225 N Main Street		Transaction ID : A-CF30572	
City Sunderland	State MA	Zip Code 01375-9573	Amount of Each Receipt this Period , 47 .
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 242 .		
C. Full Name (Last, First, Middle Initial) Joanne M. Boswell		Date of Receipt M M D D Y Y 04 22 2015	
Mailing Address 108 Mack Hill Road		Transaction ID : A-CF29250	
City Amherst	State NH	Zip Code 03031-3217	Amount of Each Receipt this Period , 1000 .
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1047 .		
SUBTOTAL of Receipts This Page (optional).....		, , 3747.00 .	
TOTAL This Period (last page this line number only).....		, , .	

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